

L220001506963 Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet **072**

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((H220001506963))



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FLORIDA LIMITED LIABILITY CO.

ORLANDO ELEVATOR Service LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. SCOTT

APR 29 2022



April 27, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXPRESS CORPORATE FILING INC.

SUBJECT: ORLANDO ELEVATOR LLC
REF: W22000055196

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P17000100624.

To make the necessary corrections and resubmit your filing, return to our website and access electronic filing, then online filing. Choose to update your request by using the confirmation number and the pin number listed above. For any questions concerning the website, please call 850-245-6939. Please disregard this letter, if you have contacted our office and were advised how to correct your document online.

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Dil Sultana
Regulatory Specialist II
New Filings Section

FAX Aud. #: H22000150696
Letter Number: 822A00009812

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Orlando Elevator Service LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

150 W. Evergreen Ave.
Longwood, FL 32750

Mailing Address:

150 W. Evergreen Ave.
Longwood, FL 32750

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Christopher L. Rivera

Name

150 W. Evergreen Ave.

Florida street address (P.O. Box **NOT** acceptable)

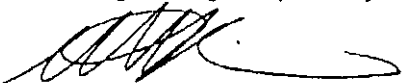
Longwood FL 32750

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGIR" = Manager

AMBR

Name and Address:

Christopher L. Rivera
150 W. Evergreen Ave.
Longwood, FL 32750

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 25, 2022 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Christopher L. Rivera

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)